



1 of 2 Issue Classification 	Application/Control No. 10/508,822	Applicant(s)/Patent under Reexamination THOMPSON ET AL.
	Examiner Bernard Dentz	Art Unit 1625

ISSUE CLASSIFICATION												
ORIGINAL					INTERNATIONAL CLASSIFICATION							
CLASS		SUBCLASS			CLAIMED					NON-CLAIMED		
514		469			A	61	K	31	/343			/
CROSS REFERENCES					C	07	D	307	/81			/
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)											
514	300	301	302	303				/			/	
514	367	375	394	415				/			/	
514	443							/			/	
546	113	114	115	116				/			/	
546	118							/			/	

(Assistant Examiner) (Date) <i>[Signature]</i> 9/10/07 (Legal Instruments Examiner) (Date)		<i>B Dentz</i> Bernard Dentz 9-10-2007 (Priamry Examiner) (Date)		Total Claims Allowed: 26 O.G. Print Claim(s) 1 O.G. Print Fig. -----	
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<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
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2	2	32	32	62	62	92	92	122	122	152	152	182	182		
3	3	33	33	63	63	93	93	123	123	153	153	183	183		
4	4	34	34	64	64	94	94	124	124	154	154	184	184		
5	5	35	35	65	65	95	95	125	125	155	155	185	185		
6	6	36	36	66	66	96	96	126	126	156	156	186	186		
7	7	37	37	67	67	97	97	127	127	157	157	187	187		
8	8	38	38	68	68	98	98	128	128	158	158	188	188		
9	9	39	39	69	69	99	99	129	129	159	159	189	189		
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13	13	43	43	73	73	103	103	133	133	163	163	193	193		
14	14	44	44	74	74	104	104	134	134	164	164	194	194		
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22	22	52	52	82	82	112	112	142	142	172	172	202	202		
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25	25	55	55	85	85	115	115	145	145	175	175	205	205		
26	26	56	56	86	86	116	116	146	146	176	176	206	206		
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ISSUE CLASSIFICATION											
ORIGINAL					INTERNATIONAL CLASSIFICATION						
CLASS		SUBCLASS			CLAIMED				NON-CLAIMED		
514		469						/			/
CROSS REFERENCES								/			/
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							/			/
548	152	178	179	180				/			/
548	217	309.7	504					/			/
549	49	58	467					/			/
								/			/
								/			/
(Assistant Examiner) (Date) (Legal Instruments Examiner) (Date)					(Primary Examiner) (Date)		Total Claims Allowed:				
							O.G. Print Claim(s)		O.G. Print Fig.		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant					<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47		
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
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	212		242		272		302		332		362
	213		243		273		303		333		363
	214		244		274		304		334		364
	215		245		275		305		335		365
	216		246		276		306		336		366
	217		247		277		307		337		367
	218		248		278		308		338		368
	219		249		279		309		339		369
	220		250		280		310		340		370
	221		251		281		311		341		371
	222		252		282		312		342		372
	223		253		283		313		343		373
	224		254		284		314		344		374
	225		255		285		315		345		375
	226		256		286		316		346		376
	227		257		287		317		347		377
	228		258		288		318		348		378
	229		259		289		319		349		379
	230		260		290		320		350		380
	231		261		291		321		351		381
	232		262		292		322		352		382
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	234		264		294		324		354		384
	235		265		295		325		355		385
	236		266		296		326		356		386
	237		267		297		327		357		387
	238		268		298		328		358		388
	239		269		299		329		359		389
	240		270		300		330		360		390